

**IN THE SUPERIOR COURT OF THE STATE OF CALIFORNIA  
IN AND FOR THE COUNTY OF \_\_\_\_\_**

In the Matter of the Petition of

\_\_\_\_\_  
Petitioner(s)

**PARENTAL CONSENT TO ADOPTION  
(Outside California)**

I/we, being the parent(s) of \_\_\_\_\_ (Gender: M F)  
Name of Minor Child

born on \_\_\_\_\_ in \_\_\_\_\_  
Date of Birth Place of Birth

give my/our full and free consent to the adoption of said child by \_\_\_\_\_  
Name(s) of Petitioner(s)

I/we understand that I/we may revoke this consent only during the thirty (30) day period beginning on the date I/we sign this consent and only if I/we have not waived my/our right to revoke the consent. I/we further understand that with the signing of the order of adoption by the court I/we shall give up all my/our rights of custody, services, and earnings of said child and I/we may not reclaim said child.

Signed in the presence of:

DATE
SIGNATURE OF MOTHER
DATE
SIGNATURE OF FATHER
FULL ADDRESS

**STATE OF** \_\_\_\_\_ )  
\_\_\_\_\_  
**COUNTY OF** \_\_\_\_\_ )

On \_\_\_\_\_ before me, \_\_\_\_\_, a Notary Public,  
personally appeared \_\_\_\_\_ personally known to me (or proved to me on the basis  
(NAME(S) OF MOTHER/FATHER)

of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

\_\_\_\_\_  
Signature (Seal)

SIGNATURE OF REPRESENTATIVE: CDSS or Delegated County Adoption Agency
CDSS DISTRICT OFFICE OR COUNTY OFFICE
ADDRESS:
TELEPHONE NUMBER: